## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 241318US2

First Inventor or Application Identifier

Kazunori BANNAI

COLOR SHIFT CORRECTING METHOD, OPTICAL WRITING DEVICE AND IMAGE FORMING APPARATUS

Assignee Name:

Assignee Address:

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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	Commissioner for Patents  ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313				
Fee Transmittal Form (e.g. PTO/SB/17)     (Submit an original and a duplicate for fee processing)	ACCOMPANYING APPLICATION PARTS				
	7.  Assignment Papers (cover sheet & document(s))				
2. ■ Specification Total Sheets 97	8. Application Data Sheet. See 37 CFR 1.76				
	9.   37 C.F.R. §3.73(b) Statement Power of Attorney				
3. Formal Drawing(s) (35 U.S.C. 113) Total Sheets	10.  English Translation Document (if applicable)				
	11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations (4)				
4. ☐ Oath or Declaration Total Pages	12. Preliminary Amendment				
a.   Newly executed (original or copy)	13. White Advance Serial No. Postcard				
b. Copy from a prior application (37 C.F.R. §1.63(d))  (for continuation/divisional with box 17 completed)	14. Certified Copy of Priority Document(s) (1) (if foreign priority is claimed)				
<ul> <li>i. □ DELETION OF INVENTOR(S)         Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).     </li> </ul>	15. Applicant claims small entity status.  See 37 CFR 1.27				
5.   CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	16. ■ Other: Request for Priority				
<ul> <li>Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</li> <li>□ Computer Readable Form (CRF)</li> <li>Specification or Sequence Listing on : <ol> <li>□ CD-ROM or CD-R (2 copies); or</li> <li>□ Paper</li> </ol> </li> <li>Statements verifying identity of above copies</li> </ul>					
c. Statements verifying identity of above copies					
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:  Continuation Divisional Continuation-in-part (CIP) of prior application no.:  Prior application information: Examiner: Group Art Unit:  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
8. Amend the specification by inserting before the first line the se	ntence:				
☐ This application is a ☐ Continuation ☐ Division	Continuation-in-part (CIP)				
of application Serial No. Filed on					
☐ This application claims priority of provisional application Seria					
19. CORRESPONDENCE ADDRESS  22850 (703) 413-3000					
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Name:	Gregory J. Maier	Registra	ition No.:	25,599
Signature:	Jan Wo		Date:	8/20/07
Name:	David A. Bilodeau	Registration No.:		42,325

Docket No.

241318US2

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Kazunori BANNAI, et al.

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

COLOR SHIFT CORRECTING METHOD, OPTICAL WRITING DEVICE AND IMAGE FORMING

**APPARATUS** 

## FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	36 - 20 =	16	x \$18	= \$288.00
INDEPENDENT CLAIMS	5 - 3 =	2	x \$84	= \$168.00
☐ MULTIPLE DEPENDENT CLAIMS (If applicable) + \$280			= \$0.00	
LATE FILING OF DECLARATION			+ \$130	= \$130.00
	\$750.00			
TOTAL OF ABOVE CALCULATIONS				\$1,336.00
☐ REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
☐ FILING IN NON-ENGLISH LANGUAGE		+ \$130 =	= \$0.00	
☐ RECORDATION OF ASSIGNMENT		+ \$40 =	= \$0.00	
			TOTAL	\$1,336.00

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A duplicate copy of this sheet is enclosed.

- A check in the amount of \$1,336.00 to cover the filing fee is enclosed.
- ☐ Credit card payment form is attached to cover the filing fee in the amount of
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment form is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

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